

DEPARTMENT OF CORRECTIONS  
Division of Adult Institutions  
DOC-3021 (Rev. 8/2007)

WISCONSIN

## PROGRESS NOTES

PATIENT NAME Last

First

DOC NUMBER

MILLER

JESSE

462433

DATE	TIME	PROGRESS NOTES - SUBJECT, OBJECTIVE, ASSESSMENT, PLAN
6/10/08		Seen in clinical obs. A&O x 3. Started ready to go back to regular unit. <i>[Signature]</i>
6/18/08	5)	Seen in HSD a "10 chest pain. Ambulatory. No skin w/lopp. Hx of panic attacks. Had just taken lorazepam prior to coming to HSD. Hands tremulous. A&O x 3. Speech clear - appropriate eye contact. Used HMD just prior.
		b) 156/86 - 98% - 94 - 18 - 98%.
		a/p) strictly. Calmed within 10" of CP was placed. Administered pt. & arranged to sleep hydrated. To work on relaxation techniques. <i>[Signature]</i>
6/12/08		20 YOWM c hx of asthma presently poorly controlled c Albuterol up to 8x /wk and Q-Var. Has been on Advair in past. c/o chest tightness he attributes to Valproic Acid taken for psych reasons. Intake lab's available ok.
		<i>[Signature]</i>
6/15/08 1755	5)	Responded to 10-30 pt. a sheet tied tightly around neck. Per co apparently pt. collapsed to floor & lost consciousness. Noted pt. lying by door unresponsive. & prompt response initially. Difficult respiratory 12-14/min. SPO <sub>2</sub> 98% RA. BP 126/86 P-84. Skin w/lopp. Unresponsive 2 min. Ammonia inhalant used & pt. responded to "my neck hurts." Quickly became oriented x 3. (Cont)

DISTRIBUTION: Original - Medical Chart, Progress Notes Section

EXHIBIT

tabbies

11

**DISTRIBUTION:** Original – Medical Chart, Progress Notes-Section

DEPARTMENT OF CORRECTIONS  
Division of Adult Institutions  
DOC-3001 (Rev. 9/03)

WISCONSIN

## OFF SITE SERVICE REQUEST AND REPORT

## REQUEST

PATIENT NAME Last <i>Miller</i>	First <i>Jesse</i>	MI	DOC NUMBER <i>462433</i>	DATE OF BIRTH <i>12/3/88</i>
REFERRED TO <i>WmH ER</i>	UW MED. RECORD #	CLINIC / FACILITY	TELEMEDICINE <input type="checkbox"/> Yes <input type="checkbox"/> No	

## REFERRAL INSTRUCTIONS

- ☐ Diagnosis Only - DO NOT START TREATMENT  
☐ Recommended Plan of Care  
☐ Start Treatment, But Return To HSU MD For Completion
- ☐ Complete The Treatment  
☐ Returning For Ongoing Care  
☐ Other

## RELEVANT SYMPTOMS / PROBLEMS / DIAGNOSIS

Attempted to harm self - sheet tied tightly around neck, apparently fell & lost consciousness x 2-3 min. Now ASAP

## ALLERGIES

Tetracycline  
Haldol - NMS

MEDICATIONS: ☐ See Attached

QUESTIONS / OUTCOMES TO BE ADDRESSED BY THIS EVALUATION *Ch neck pain.*

## ADDITIONAL DATA ENCLOSED

- ☐ Progress Note Extracts  
☐ Laboratory Test Results  
☐ X-ray Reports, Films  
☐ Other

OUTPATIENT CONTACT DATE <i>6/15/08</i>	TIME <i>1:50 PM</i>	OR	ADMISSION DATE
REFERRED BY <i>Hallerer/SQuaw</i>	HSU	TELEPHONE NUMBER	DATE SIGNED <i>6/15/08</i>

## REPORT

## PRIMARY DIAGNOSIS / OTHER(S) DIAGNOSIS

Depression  
Suicide attempt  
petechiae

## PERTINENT HISTORY AND OBJECTIVE FINDINGS / TREATMENTS / PROCEDURES AND DIAGNOSTIC WORK PERFORMED

C-S spine - WNL

PLAN / RECOMMENDATION'S (Follow-up appointment via telemedicine? ☐ Yes ☐ No)

Special obs unit  
Suicide precautions  
See Clinical Services ASAP

## INDICATE CLASSIFICATION IF YOU ARE RECOMMENDING SURGERY OR A PROCEDURE (See Reverse Side for Description)

- ☐ Class I ☐ Class II ☐ Class III-A ☐ Class III-B ☐ Class IV ☐ Non-Surgical

PHYSICIAN NAME (Please Print) <i>W. KRIEGER</i>	PHYSICIAN SIGNATURE <i>W. Krieger</i>	DATE SIGNED <i>6/15/08</i>
HOSPITAL/ CLINIC NAME <i>WmH</i>	TELEPHONE NUMBER <i>920-324-6500</i>	

DISTRIBUTION: ORIGINAL - DOC Medical Record (Consultation Section); Copy - Off-Site Provider's Medical Record